

ENSIGN GROUP, INC  
 Form 3  
 November 08, 2007

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL  
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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Â Christensen Roy E (Last) (First) (Middle)  C/O THE ENSIGN GROUP, INC.,Â 27101 PUERTA REAL, SUITE 450  (Street)  MISSION VIEJO,Â CAÂ 92691  (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 11/08/2007	3. Issuer Name <b>and</b> Ticker or Trading Symbol ENSIGN GROUP, INC [ENSG]	4. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) Chairman of the Board	5. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) <input type="checkbox"/> Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person
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**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	3,910,000	I <u>(1)</u>	By the Christensen Family Trust Dated 8/17/92

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I)

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Christensen Roy E C/O THE ENSIGN GROUP, INC. 27101 PUERTA REAL, SUITE 450 MISSION VIEJO, CA 92691	Â X	Â X	Â Chairman of the Board	Â
Christensen Family Trust dated 8/17/92 C/O THE ENSIGN GROUP, INC. 27101 PUERTA REAL, SUITE 450 MISSION VIEJO, CA 92691	Â	Â X	Â	Â
Christensen Carol M. C/O THE ENSIGN GROUP, INC. 27101 PUERTA REAL, SUITE 450 MISSION VIEJO, CA 92691	Â	Â X	Â	Â

## Signatures

/s/ Daniel Walker, as attorney-in-fact for Roy E. Christensen	11/08/2007
**Signature of Reporting Person	Date
/s/ Daniel Walker, as attorney-in-fact for the Trustee of the Christensen Family Trust dated 08/17/92	11/08/2007
**Signature of Reporting Person	Date
/s/ Daniel Walker, as attorney-in-fact for Carol M. Christensen	11/08/2007
**Signature of Reporting Person	Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(b)(v).
  - \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) These shares are directly owned by the Christensen Family Trust dated 8/17/92, a ten percent owner of the issuer, and indirectly by Roy E. Christensen, a ten percent owner, director and officer of the issuer, and indirectly by Carol M. Christensen, a ten percent owner of the issuer

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### Remarks:

Exhibit List: Exhibit 24.1 Power of Attorney for Roy E. Christensen; Exhibit 24.2 Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.